K031877

EXHIBIT 2

SUMMARY OF SAFETY AND EFFECTIVENESS DATA AUG - 1 2003

Kenneth J. Berk 80 Oakland Street PO Box 780 Watertown, MA 02472 USA Telephone:

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617-926-6262

Email: ken@pulpdent.com

DEVICE NAME:

Embrace[™] Wet-Bond Restorative Material

PREDICATE DEVICES:

Pulpdent EmbraceTM Pit and Fissure Sealant Ivoclar Tetric Flow Ivoclar Compoglass Flow Kuraray Clear-Fil Kerr OptiBond Solo Plus 3

DESCRIPTION AND INTENDED USE:

EmbraceTM Wet-Bond Restorative Material is a hydrophilic, fluoride-releasing, light-cured material recommended for use as a tooth replacement material. Applications of EmbraceTM Wet-Bond Restorative Material include: Class I, III, IV, and V cavity preparations and as a restorative material for small incipient lesions.

COMPARISON WITH PREDICATE PRODUCTS:

EmbraceTM Wet-Bond Restorative Material is substantially equivalent in design, composition and intended use to the products listed above. Please see Exhibit 4 for the entire comparison.

SAFETY AND EFFECTIVENESS:

Pulpdent EmbraceTM Wet-Bond Restorative Material is substantially equivalent in design, composition, performance, intended use, safety and effectiveness to the predicate products listed above. The predicate products have been found substantially equivalent under the 510(k) premarket notification process as Class II Dental Devices under CFR 872.3690, 872.3765 or 872.3200. The chemical ingredients used in EmbraceTM Wet-Bond Restorative Material are used in the predicate products. Though there is no ISO or ANSI/ADA standard applicable to EmbraceTM Wet-Bond Restorative Material, laboratory testing has shown that EmbraceTM Wet-Bond Restorative Material is equivalent in physical and mechanical properties to the predicate products.

According to the NIH Technology Assessment Conference on *Effects and Side-Effects of Dental Restorative Materials*: "General usage of these materials over about 20 years indicates a high benefit-to-risk ratio...both composites and glass ionomers are relatively trouble-free. There is no evidence of short-term or long-term risk...There is no suspicion of any problems after virtually billions of procedures in the United States.



AUG - 1 2003

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Mr. Kenneth J. Berk
Director
Pulpdent Corporation
80 Oakland Street
Watertown, Massachusetts 02472

Re: K031877

Trade/Device Name: Embrace™ Wet-Bond Restorative Material

Regulation Number: 21 CFR 872.3690

Regulation Name: Tooth Shade Resin Material

Regulatory Class: II Product Code: EBF Dated: June 13, 2003 Received: June 24, 2003

Dear Mr. Berk:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

This letter will allow you to begin marketing your device as described in your Section 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Office of Compliance at (301) 594-4613. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97) you may obtain. Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its Internet address http://www.fda.gov/cdrh/dsma/dsmamain.html

Sincerely yours,

Susan Runner, DDS, MA

Interim Director

Division of Anesthesiology, General Hospital, Infection Control and Dental Devices

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Office of Device Evaluation

Center for Devices and Radiological Health

INDICATIONS FOR USE STATEMENT

510 (k) Number (if known)	K031877
Device Name	Pulpdent Embrace [™] Wet-Bond Restorative Material
Indications for Use):
material recommende Wet-Bond Restorativ	d Restorative Material is a hydrophilic, fluoride-releasing, light-cured ed for use as a tooth replacement material. Applications of Embrace Material include: Class I, III, IV, and V cavity preparations and as a r small incipient lesions.
	(Division Sign-Off) Division of Anesthesiology, General Hospital, Infection Control, Dental Devices
	510(k) Number: K 031877
Please do no	ot write below this line. Continue on another page if needed.
Cond	surrence of CDRH, Office of Device Evaluation (ODE)
Prescription Use (Per 21 CFR 801.10	